U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

939				
29	JB DOGM	M/049/030	10/26/05	
8603	Postage Certified Fee	The state of the s	5-yr review	
E000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)		Here	
0570	Total Postage & Fees	\$		
7002 05	Street, Apt. No.; or PO Box No. 9780 S 5200 W City, State, ZIP+4			

WEST JORDAN UT PS Form 3800, January 2001

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84088

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

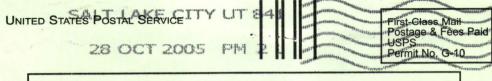
- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- Certified Mail is not available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: X No If YES, enter delivery address below: JOHN HEWITT INTERSTATE BRICK CO 9780 S 5200 W WEST JORDAN UTNC 84 08 2005 3. Service Type DIV OF OIL GAS & MINING Certified Mail ☐ Express Mall ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. JB DOGM M/049/030 10/26/05 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7002 0510 0003 8603 2939 (Transfer from service label) PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



• Sender: Please print your name, address, and ZIP+4 in this box • RECEIVED

OCT 31 2005

Joelle Borns

Joelle Borns

Division Division of Oil, Gas and Mining

1594 West North Temple Suite 1210 Salt Lake City UT 84114-5801